

2154

TRANSMITTAL FORM

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Total Number of Pages in This Submission	3	Attorney Docket Number	36992.00074
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ENCLOSURES (check all that apply)

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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Squire, Sanders & Dempsey L.L.P. 600 Hansen Way, Palo Alto, CA 94304-1043		
Signature			
Printed Name	Marc A. Sockol		
Date	June 14, 2005	Reg. No.	36992.00074

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	
Typed or printed name	Cathi L.G. Thoressell
	Date
	June 14, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT
Attorney Docket No.: 36992.00074 (HAL 169)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Examiner: Ashokkumar B. PATEL

Akira YAMAMOTO, *et al.*

Serial No.: 09/923,157

Art Unit: 2154

Filed: August 6, 2001

Title: HIGH PERFORMANCE STORAGE ACCESS ENVIRONMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Sir:

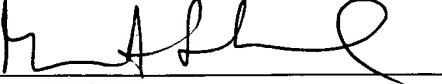
In response to the Restriction Requirement mailed May 17, 2005, Applicants elect Group I, identified by the Examiner as Claims 1-13.

The undersigned authorizes any fees which may be required, or credit any overpayment to Deposit Account No. 05-0150. Should the Examiner have any questions regarding this communication, the Examiner is invited to contact the undersigned at the telephone number shown below.

Date: June 14, 2005

Respectfully submitted,

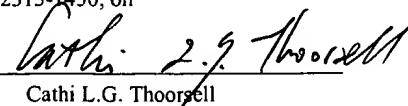
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Date: June 14, 2005

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Cathi L.G. Thoressell